AUG 0 7 2001

P70/SB/30 (08-00)

P70/SB/30 (08-00)

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FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

address: Commissioner for Patents, Box RCE, Washington, DC 20231.

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|------------------------|--------------------------------|--|--|--|
| Application Number | 08/573,519 | | | |
| Filing Date | December 15, 1995 | | | |
| First Named Inventor | HIDEO TAKIGUCHI | | | |
| Group Art Unit | 2671 RECEIVED | | | |
| Examiner Name | A. Jankus AUG 0 9 2001 | | | |
| Attorney Docket Number | 862.1336 Technology Center 260 | | | |

| <u>NOTE</u> : 37 (continued prosec AIPA. See Chan | for Continued Examination (RCE) under 37 C.F.R. C.F.R. § 1.114 is effective on May 29, 2000. If the above-identific cution application (CPA) under 37 C.F.R. § 1.53(d) (PTO/SB/29) inges to Application Examination and Provisional Application Prac 2000), 1233 Off. Gaz. Pat. Office 47 (Apr. 11, 2000), which estab | ed application was instead of a RCE to tice, Final Rule, 65 | filed prior to May 29, 2000, appli to be eligible for the patent term at 5 Fed. Reg. 50092 (Aug. 16, 2000 | cant may wish to consider filing a diustment provisions of the | |
|---|--|---|---|--|--|
| a. | Affidavit(s)/Declaration(s) Information Disclosure Statement (IDS) Other Submission of Corrected Drawing | tion is request all not exceed 3 m 114 when the RCE ciencies in the | eviously filed on ted under 37 C.F.R. § 1.1 nonths; Fee under 37 C.F.R. § 1.1 | 03(c) for a period of | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED | | | | | |
| Name (Print/Type) | LEONARD P. DIANA | Registration No | o. (Attorney/Agent) | 29,296 | |
| Signature | Tell' Diame | Date A | AUGUST 6, 2001 | | |
| | CERTIFICATE OF MAILING | G OR TRANSMISS | SION | | |
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| Name (Print/Type) | | | | <u></u> | |
| Signature | Laur Chalannach Thir form in a climate that the C. C. | Date | | 0 | |
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